

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application :	Examiner :	GAU :
<u>09/847309</u>	<u>Ingberg, T</u>	<u>2124</u>
From: <u>S. H. C.</u>	Location: <u>(D) FMF FDC</u>	Date: <u>03-31-05</u>
Tracking #: <u>06079877</u>		Week Date: <u>02-21-05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>08-10-04</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Improper Dependency: Original claims 35 and 36 depend upon higher numbered original claim 38

[XRUSH] RESPONSE: claim index correction

INITIALS: TT

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04